MIAMI-DADE COUNTY 2011 GROUP INSURANCE BI-WEEKLY PREMIUMS

Employees With Domestic Partner Dependents and\or Overage Children *26+ to 30

NOTE: COVERAGE FOR OVERAGE CHILDREN IS LIMITED TO MEDICAL ONLY, AND APPLIES TO CHILDREN WHO ARE AGE 26+. ELIGIBILITY ENDS DECEMBER 31 OF THE YEAR THE ADULT CHILD TURNS 30.

YEAR THE ADULT CHILD TURNS 30.							
AVMED MEDICAL PLANS		EMPLOYEE TOTAL DEDUCTION	PRE-TAX PORTION	POST-TAX PORTION	¹ IMPUTED BW INCOME TO EE (Subsidy)		
Code 342 Reg (New Hire Exec 341)	AvN	led POS			(Gubsiuy)		
EE + Child & DP Child (and\ or 26+ Chld)	Level 1	\$285.86	\$14.90	\$270.96	\$98.94		
EE + DP Child (and\or 26+ Chld)	Level 2	\$285.86	\$14.90	\$270.96	\$98.94		
EE + Domestic Partner	Level 3	\$344.54	\$14.90	\$329.64	\$119.26		
EE + Child & Domestic Partner	Level 4	\$595.59	\$285.86	\$309.73	\$119.26		
EE + DP & DP Child (and\or 26+ Chld)	Level 5	\$595.59	\$14.90	\$580.69	\$206.15		
EE + Child, DP & DP Child (and\or 26+ Chld)	Level 6	\$595.59	\$14.90	\$580.69	\$206.15		
EE + Spouse & 26+ Child	Level 7	\$595.59	\$344.54	\$251.05	\$98.94		
Code 344 Reg (New Hire Exec 343) AvMed High Opt HMO							
EE + Child & DP Child (and\ or 26+ Chld)	Level 1	\$180.17	\$0.00	\$180.17	\$62.36		
EE + DP Child (and\or 26+ Chld)	Level 2	\$180.17	\$0.00	\$180.17	\$62.36		
EE + Domestic Partner	Level 3	\$208.35	\$0.00	\$208.35	\$73.95		
EE + Child & Domestic Partner	Level 4	\$287.77	\$180.17	\$107.60	\$73.95		
EE + DP & DP Child (and\or 26+ Chld)	Level 5	\$287.77	\$0.00	\$287.77	\$112.91		
EE + Child, DP & DP Child (and\or 26+ Chld)	Level 6	\$287.77	\$0.00	\$287.77	\$112.91		
EE + Spouse & 26+ Child	Level 7	\$287.77	\$208.35	\$79.42	\$62.36		
Code 346 Reg (New Hire Exec 345)	AvMed Low	Opt HMO			1		
EE + Child & DP Child (and\ or 26+ Chld)	Level 1	\$169.83	\$0.00	\$169.83	\$58.38		
EE + DP Child (and\or 26+ Chld)	Level 2	\$169.83	\$0.00	\$169.83	\$58.38		
EE + Domestic Partner	Level 3	\$196.42	\$0.00	\$196.42	\$69.23		
EE + Child & Domestic Partner	Level 4	\$271.36	\$169.83	\$101.53	\$69.23		
EE + DP & DP Child (and\or 26+ Chld)	Level 5	\$271.36	\$0.00	\$271.36	\$105.70		
EE + Child, DP & DP Child (and\or 26+ Chld)	Level 6	\$271.36	\$0.00	\$271.36	\$105.70		
EE + Spouse & 26+ Child	Level 7	\$271.36	\$196.42	\$74.94			
JMH MEDICAL PLAN		EMPLOYEE TOTAL DEDUCTION	PRE-TAX PORTION	POST-TAX PORTION	¹ IMPUTED BW INCOME TO EE (Subsidy)		
Code 348 Reg (New Hire Exec 347)	JMH High						
EE + Child & DP Child (and\ or 26+ Chld)	Level 1	\$180.17	\$0.00				
EE + DP Child (and\or 26+ Chld)	Level 2	\$180.17	\$0.00	\$180.17	\$57.99		
EE + Domestic Partner	Level 3	\$208.35	\$0.00	\$208.35			
EE + Child & Domestic Partner	Level 4	\$287.77	\$180.17	\$107.60			
EE + DP & DP Child (and\or 26+ Chld)	Level 5	\$287.77	\$0.00	\$287.77	\$253.90		
EE + Child, DP & DP Child (and\or 26+ Chld)	Level 6 Level 7	\$287.77	\$0.00	\$287.77	\$253.90		
EE + Spouse & 26+ Child		\$287.77	\$208.35	\$79.42	\$57.99		
Code 350 Reg (New Hire Exec 349) EE + Child & DP Child (and\ or 26+ Child)	JMH Low	\$169.83	\$0.00	\$169.83	\$47.46		
EE + DP Child (and/or 26+ Child)	Level 1	\$169.83	\$0.00	\$169.83	·		
EE + Domestic Partner	Level 2	\$196.42	\$0.00	\$109.03	\$76.11		
EE + Child & Domestic Partner	Level 3	\$271.36	\$169.83	\$190.42			
EE + Child & Domestic Partner EE + DP & DP Child (and\or 26+ Child)	Level 4	\$271.36	\$0.00	\$271.36	-		
· · · · · ·	Level 5 Level 6	· ·	-	-	\$221.73		
EE + Child, DP & DP Child (and\or 26+ Child)	Level 7	\$271.36 \$271.36	\$0.00 \$196.42	\$271.36			
EE + Spouse & 26+ Child	LEVEI I	\$271.36	φ190.4Z	\$74.94	\$47.46		

NOTE: Cannot add DP child (ren) during the year if tier level is EE + Child (pre-tax rate). Pre-tax portion cannot be changed during the year without an IRS Section 125 qualifying event.

DELTA DENTAL Code 389 Reg (New Hire Exec 379)		EMPLOYEE TOTAL DEDUCTION	PRE-TAX PORTION	POST-TAX PORTION	¹ IMPUTED BW INCOME TO EE (Subsidy)
EE + DP Child - (EE+1\Std)	Level 1	\$14.09	\$0.00	\$14.09	\$0.00
EE + DP Child - (EE+1\Enr)	Level 2	\$22.89	\$4.45	\$18.44	\$0.00
EE + Domestic Partner - (EE+1\Std)	Level 3	\$14.09	\$0.00	\$14.09	\$0.00
EE + Domestic Partner - (EE+1\Enr)	Level 4	\$22.89	\$4.45	\$18.44	\$0.00
EE + Child & DP Child - (F\Std)	Level 5	\$31.53	\$0.00	\$31.53	
EE + Child & DP Child - (F\Enr)	Level 6	\$45.72	\$4.45	\$41.27	\$0.00
EE + Child & Domestic Partner - (F\Std)	Level 7	\$31.53	\$0.00	\$31.53	
EE + Child & Domestic Partner - (F\Enr)	Level 8	\$45.72	\$4.45	\$41.27	\$0.00
EE + Domestic Partner & DP Child - (F\Std)	Level 9	\$31.53	\$0.00	\$31.53	
EE + Domestic Partner & DP Child - (F\Enr)	Level 10	\$45.72	\$4.45	\$41.27	\$0.00
EE + Child, Domestic Part. & DP Child - (F\S)	Level 11	\$31.53	\$0.00	\$31.53	\$0.00
EE + Child, Domestic Part. & DP Child - (F\E)	Level 12	\$45.72	\$4.45	\$41.27	\$0.00
HUMANA OHS DENTAL OHS Code 385 Reg ((New Hire Exec 375)		EMPLOYEE TOTAL	PRE-TAX PORTION	POST-TAX PORTION	¹IMPUTED BW INCOME TO EE (Subsidy)
EE + DP Child - (EE+1\Std)	l aval d	DEDUCTION \$2.42	\$0.00	\$2.42	\$0.00
EE + DP Child - (EE+1\Star)	Level 1	\$6.81	\$0.00 \$2.63	\$4.18	· ·
EE + Domestic Partner - (EE+1\Std)	Level 2	\$2.42	\$0.00	\$ 4.10 \$2.42	\$0.00
EE + Domestic Partner - (EE+1\Enr)	Level 3	\$6.81			
EE + Child & DP Child - (F\Std)	Level 4	\$5.65	\$2.63 \$0.00	\$4.18 \$5.65	
EE + Child & DP Child - (F\Enr)	Level 5 Level 6	\$12.99	\$0.00 \$2.63	\$10.36	
EE + Child & Domestic Partner - (F\Std)		\$5.65	\$0.00	\$5.65	\$0.00
EE + Child & Domestic Partner - (F\Enr)	Level 7	\$12.99	\$0.00 \$2.63	\$10.36	
EE + Domestic Partner & DP Child - (F\Std)	Level 8	\$5.65	\$0.00	\$10.36 \$5.65	
EE + Domestic Partner & DP Child - (F\Enr)	Level 9 Level 10	\$12.99	-	•	
EE + Child, Domestic Part. & DP Child - (F\S)			\$2.63	\$10.36	
EE + Child, Domestic Part. & DP Child - (F\E)	Level 11	\$5.65	\$0.00	\$5.65 \$10.36	\$0.00 \$0.00
	Level 12	\$12.99 EMPLOYEE	\$2.63 PRE-TAX	POST-TAX	¹IMPUTED BW
MetLife DHMO DENTAL Code 392 Reg 393		TOTAL DEDUCTION	PORTION	PORTION	INCOME TO EE (Subsidy)
EE + DP Child - (EE+1\Std)	Level 1	\$2.62	\$0.00	\$2.62	\$0.00
EE + DP Child - (EE+1\Enr)	Level 2	\$5.67	\$1.83	\$3.84	\$0.00
EE + Domestic Partner - (EE+1\Std)	Level 3	\$2.62	\$0.00	\$2.62	\$0.00
EE + Domestic Partner - (EE+1\Enr)	Level 4	\$5.67	\$1.83	\$3.84	\$0.00
EE + Child & DP Child - (F\Std)	Level 5	\$6.14	\$0.00	\$6.14	\$0.00
EE + Child & DP Child - (F\Enr)	Level 6	\$11.39	\$1.83	\$9.56	\$0.00
EE + Child & Domestic Partner - (F\Std)	Level 7	\$6.14	\$0.00	\$6.14	\$0.00
EE + Child & Domestic Partner - (F\Enr)	Level 8	\$11.39	\$1.83	\$9.56	\$0.00
EE + Domestic Partner & DP Child - (F\Std)	Level 9	\$6.14	\$0.00	\$6.14	\$0.00
EE + Domestic Partner & DP Child - (F\Enr)	Level 10	\$11.39	\$1.83	\$9.56	\$0.00
EE + Child, Domestic Part. & DP Child - (F\S)	Level 11	\$6.14	\$0.00	\$6.14	\$0.00
EE + Child, Domestic Part. & DP Child - (F\E)	Level 12	\$11.39	\$1.83	\$9.56	\$0.00
OPTIX VISION PLAN Code 362 Reg		EMPLOYEE TOTAL DEDUCTION	PRE-TAX PORTION	POST-TAX PORTION	1IMPUTED BW INCOME TO EE
EE + DP Child (EE+1)	Level 1	\$4.12	\$2.06	\$2.06	\$0.00
EE + Domestic Partner (EE+1)	Level 2	\$4.12	\$2.06	\$2.06	
EE + Child & DP Child (Family)	Level 3	\$7.57	\$2.06	\$5.51	\$0.00
EE + Child & Domestic Partner (Family)	Level 4	\$7.57	\$2.06	\$5.51	\$0.00
EE + Domestic Partner & DP Child (Family)	Level 5	\$7.57	\$2.06	\$5.51	\$0.00
EE + Child, Domestic Part. & DP Child (Family)	Level 6	\$7.57	\$2.06	\$5.51	\$0.00

Note: Current IRS rules do not permit pre-taxing of the portion of the premium an employee pays related to a domestic partner dependent. Employees who cover a domestic partner and\or the child of the domestic partner will have the insurance payroll deduction separated into pre-and post-tax amounts. According to IRS rules, an employee may not receive a tax advantage on any portion of the premium paid for domestic partner dependent coverage. In the Employee + Child(ren) tier, if the group includes dependent children of the employee as defined by IRS rules and also child dependents of the domestic partner, the entire premium will be considered taxable and deducted on a post-tax basis.

Since the dental and vision plans have enrollment tiers levels based on # of dependents only and not specific to dependent type (children or spouse), only the employee's premium can be carved out as pre-tax.

¹ Federal tax laws require that the fair market value of domestic partner benefits (and coverage for overage children 26+ to 30) be included in the employee's income and subject to taxes, including FICA\MICA taxes. The amount shown in the column marked "Imputed Income" becomes additional income to the employee, in accordance with IRS rules and are taxed accordingly. Consult a tax advisor on how this impacts your particular situation.